

Special Event & Use of City Property Application - 2016

Applicant and Sponsoring Organization Information

Sponsoring Organization: Commercial (for profi	t) 🗆 Nonc	ommercial (non	profit)
Chief Officer/President of Organization:	Name:		
Email:	Phone:		
Address:			7. 0 1
Street/PO Box	City	State	Zip Code
Applicant Contact & Information:	Name:		
Email:	Phone:		
Address:			
Address:Street/PO Box	City	State	Zip Code
Please list any professional event organizer to work on your behalf to produce this even ware:	nt.		
Email:	_ Phone:		
Address:			
Street/PO Box	City	State	Zip Code
Contact Person "on site" day of event:		Phone: _	
Alternate Contact & number:			

(*This person(s) must be in attendance for the event and available to City Officials.)

Event Information

Type of Event: Event Title		
		♦ Concert
♦ Auto Show/Event♦ Demolition Derby	♦ Endurance Bicycle Event	♦ Equistrian Trail Ride
♦ Festival in the Park		♦ Rodeo Event
Running Event	Sporting Event (Baseball, Softb	all, Soccer, etc.)
♦ Tractor Pull	♦ Other	
Astrol Frank Data(s)	Takal Audicinated Att	andanas.
Actual Event Date(s): Month/Day,	Total Anticipated Atti	(Contestants & Spectators)
Monun Day/	rteal	(Contestants & Speciators)
Event Hours: start timeam/p	m end time am/pm	
an, p.	сла аллоалл, рлл	
Set up/assembly/construction date: _	start timeam/p	m end timeam/pm
Please describe your setup/assembly v	vork:	
Dismantle Date: start ti	meam/pm end time	_am/pm
	•	-
Please describe your dismantle work:		
Are admission, entry, or participant fe	es required? Yes No	
TC /		
If YES, please explain the purpose & a	imount(s):	

Additional Information Required for Facility Use

Location of even	t:		
♦ Armory	•	♦ Barry Stadium	
♦ Commit	unity Center	♦ Plaza (H-D Rally Point)	♦ Hills & Plains Park
♦ Lion's C	Club Park	♦ Sturgis Fairgrounds	♦ Woodland Park
Other _			
DI ' I' I '	· · ·		
	f you request use of	the following:)/day for use of facility	
_		, both)	
	Track	, botti)	
	Grandstand		
	Additional Bleacher	S	
		rs (hold 50) qty	
		r (holds 150) <i>only 1 available</i>	
Ħ	Kitchen	,	
Ħ	Building Restrooms	1	
=======================================	Arena Lighting (\$10	00 minimum fee <u>required</u> in addit	ion to facility fee)
Barry Sta	dium		
	Arena		
	Wooden Buildings		
	Water tank and/or		
•	Woodland Park, Lic		
		, please name)	
	Concrete Stage at (
Hills & Pla	Utilities – Electrical	, water, etc.	
	Building Restrooms		
	5	100 minimum fee <u>required</u> /event	1
	Utilities – Electrical	-)
		, Water, Ltc.	
	, , ,		
	-	ist on page 4 before requestir	_
	Tents	10′x10′ − qty ♦ 10′x2	0' – qty
#	Garbage Totes ♦	90 gal – qty \$ 300 g	jal – qty
		Small – qty (\$100.00 depo	osit per bleacher)
	Picnic Tables ♦	lables – qty	at. A Chaire at.
		Round – qty Rectangle	- qty ♦ Chairs - qty
	Barricades – if so, I	els - if so, how many	
		day \diamond Requested Date/Time:	
		uay V Requested Date/Time:	
-			· · · · · · · · · · · · · · · · · · ·

Inventory List and Notice of Fees.

- **T** City Tents Tents may be checked out from the City of Sturgis for your event. Organization will be required to provide labor for setup/teardown without assistance from the City of Sturgis.
 - o 10' x 10' popup tent (2 qty. available in inventory)
 - o 10' x 20' (3 qty. available in inventory)
 - For additional or larger tents, please contact event rental companies
- **♯** Portable Toilets
 - o Please contact sanitation companies to rent portable toilets for your event
 - Organization is responsible for scheduling rental, delivery/pickup and any servicing/pumping of toilets for the event and is responsible for the costs associated with those services.
- Bleachers (6 qty. available in inventory)
 - \$100.00 cash deposit required per bleacher. Deposit may be returned within 7 days if no damage is found upon inspection
 - o Portable Aluminum bleachers can accommodate approximately 50 people
 - o Bleachers must be transported by the organization and require ball hitch
- □ Picnic Tables (10 qty. available in inventory 6 regular, 4 ADA accessible)
 - o Picnic tables typically accommodate 6-8 people per table
 - o tables may be provided by the City but organization will be required to transport tables
- # Banquet Tables
 - o 6' Round tables seat 8-10 people
 - o 8' Rectangle tables seat 8-10 people
 - Fold up Chairs
- # Crowd Control Panels
 - o Galvanized Steel Panels are 4' tall x 61/2' wide
 - o Panels are available upon request, organization will be required to transport panels
 - Organization will also be responsible for setup/teardown of panels
- **#** Barricades
 - 10 qty. reflective barricades available
- # Garbage Totes
 - o 90 gal totes
 - o 300 gal totes
- # Electronic Message Board
 - Electronic Message Boards will be used in place of street banners. Please provide information you would like diplayed on the message boards to advertise your event.
- # Ambulance
 - \$300/day fee (rate based on 8 hour day)
 - *Please call 347-5801 for scheduling arrangements and payment

***Inventory items may be checked in/out from the the City of Sturgis. A key for the inventory storage yard may be acquired from the Rally & Events Dept. during normal business hours (8am-4pm • Mon-Fri). Inspection of the inventory will be completed by city staff. However, staff is not required to assist with loading or unloading of the inventory. Please provide your own labor & assistance for loading/unloading of inventory.

Are you are requesting the forfeit of any fees? No	Yes
*Please list the amount \$	

Updated 1/12/16

List the benefits of your event to the of fees associated with your event:			
Does this event include the sale of: Non alcoholic beverages Please explain:	_		♦Retail Items
(If Merchandise will be sold, you must co	mply with state sales tax la	w. Contact SD D	Dept. of Revenue Office)
*If alcohol is served on city property of Special Events License. Also, please m	or in public right-of-way, pl	ease contact City	Hall (347-4422) for a
Does this event include the use of:	. 5		ystem
Have you hired any Professional Securevent? Yes No If yes, Security Organization: Security Organization Address:	please list:	, ,	
Security Director Name:		Phone:	
You are responsible for First Aid Staffing in Sturgis that request emergency services. Please contact Sturgis Fire/Please explain arragements have you Ambulance Service	vices on site are required Ambulance at 347-5801. made for:	to use Sturgis	Ambulance and Fire
Fire Service			

Does this event require street closure(s)?

No

Yes - *Please complete the street closure request attached

If your organization	on is nonprofit, please exp	ain why:		Updated 1/12/16
•	1c3 status? Yes No _	•	a copy of your exem	ption)
provide a <u>copy</u> of general liability insurance cover	Insuran our event will be requir of their <u>certificate of ins</u> coverage, listing the Ci ring spectators. Additions	surance that provid ity of Sturgis as an nal insurance may	roval. The applica es for at least \$1, <i>'Additional Insure</i>	.000,000 in <u>ed′</u> and
Name of Insuranc	e Company:			
Agent:		_ Business Phone:		
Address:	· · · · · · · · · · · · · · · · · · ·			
	Street	City	State	Zip Code
	Affida	vit of Applican	t	
knowledge and be regulations govern proposed event a	nformation in the foregoine elief and that I have read, ning the proposed Special nd agree that our organiza incurred because of this ev	understand and agree Event. I am authorize tion will be financially	e to abide by the rule ed to commit my org responsible for any	es and ganization to this /all costs and
Applicant:	Signa (<i>print)</i>	ature:	Date:	
	(print)			
Application shou	ld be submitted at least 60	days in advance of e	vent to be considered	ed for approval.
	*Once application has urgis - Rally/Events Dept. 505-720-0800 ext#217 Fa	- 1040 Harley-Davids	son Way, Sturgis, SI	

*Upon approval of the application, applicant may be required to complete lease agreement and paperwork at the City Hall Office - 1040 Harley-Davidson Way, Sturgis, SD 57785 (347-4422)

Event Street Closure Request Form



(Please attach a \$50.00 payment for street closure request)

Event Name:		
Street(s) Closure location(s)	requested:	
(Please submit	a map of the requested street closure	with your request form.
Date/Time of Street Closure	requested:	
Date/Time of Street(s) re-op	pening:	
Reason for Requested Stree	t(s) Closure:	
*Written Notification of street closure is required	businesses/residents adjacent of	r within 200 feet of proposed
Have you notified the	businesses/residents within the 200'	requirement? Yes No
• Date of notification:		
Please submit a list o	f names/addresses you have notified	
Please submit a copy	of your written letter of notification	
Additional Comments:		
Submitted by:	Signature:	Date:

(Street Closure Request $\underline{\text{must}}$ be submitted at least $\underline{\text{60 days}}$ in advance of event)